Signature

12/0	Jc961
2/00	S C
	P P

PTO/SB/17 (2/98)
Approved for use through 9/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
officion of Information unless it displays a valid OMB control number.

Under the Paperwork Reduction Act of 1995, no persons are required to re

Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

(\$) 355.00

separa de aconoción de autorización esmoca a dispulya a vaso como contra sustitua.					
Complete If Known					
Application Number					
Filing Date	·				
First Named Inventor	Nomura				
Examiner Name					
Group / Art Unit					
Attorney Docket No.	QSTR-01.0				

Deposit Account

METHOD OF PAYMENT (check one)	FEE CALCULATION (contin	ued)
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit	3. ADDITIONAL FEES Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description	Fee Paid
Account	105 130 205 65 Surcharge - late filing fee or oath	
Number Deposit Account	127 50 227 25 Surcharge - late provisional filing fe cover sheet.	e or
Name	139 130 139 130 Non-English specification	
Charge Any Additional Fee Required Under 37 C.F.R. § 1.18 at the Maling	147 2.520 147 2.520 For filing a request for recomments	<u>, </u>
37 C.F.R. §§ 1.16 and 1.17 of the Notice of Allowance	112 820° 112 920° Requesting publication of SIR prior Examiner action	10
2. Payment Enclosed: Check Money Other	113 1,840° 113 1,840° Requesting publication of SIR after Examiner action	
	115 110 215 65 Extension for reply within first mont	h []]
FEE CALCULATION	116 400 218 200 Extension for reply within second m	onth
1. BASIC FILING FEE	117 950 217 475 Extension for reply within third mon	th
Large Entity Small Entity	118 1,510 218 755 Extension for reply within fourth mo	nth
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	128 2,060 228 1,030 Extension for reply within fifth month	h
101 790 201 395 Utility filing fee 355	119 310 219 155 Notice of Appeal	
106 330 206 165 Design filing fee	120 310 220 155 Filing a brief in support of an appear	
107 540 207 270 Plant filing fee	121 270 221 135 Request for oral hearing	
108 790 208 395 Reissue filing fee	138 1,510 138 1,510 Petition to Institute a public use pro	eeding
114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 355.	141 1,320 241 660 Petition to revive - unintentional	
2 EXTRA CLAIM FEES	142 1,320 242 660 Utility issue fee (or reissue)	
Fee from Extra Claims below Fee Paid	143 450 243 225 Design issue fee	
Total Claims -20** - X	144 670 244 335 Plant Issue fee	
Independent .3 x	122 130 122 130 Petitions to the Commissioner	
Multiple Dependent	123 60 123 50 Patitions related to provisional applie	eations
™or number previously paid, if greater, For Reissues, see below	126 240 126 240 Submission of Information Disclosur	e Stmt
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment property (times number of properties	
103 22 203 11 Claims in excess of 20	146 790 246 395 Filing a submission after final rejecti	·
102 82 202 41 Independent claims in excess of 3	(37 CFR 1.129(a)) 149 790 249 395 For each additional invention to be	<u> </u>
104 270 204 135 Multiple dependent claim, if not paid	149 790 249 395 For each additional Invention to be examined (37 CFR 1.129(b))	
109 82 209 41 ** Reissue Independent claims ever original patent	Other fee (specify)	_
110 22 210 11 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)	_
SUBTOTAL (2) (\$) 0	Reduced by Basic Filing Fee Paid SUBTOTAL (3)	(\$) 0
SUBMITTED BY	Complete	(if applicable)
Typed or Robert J. Petersen	Reg. Number	35,318
Printed Name Kobert J. Petersen	iveg. Homber	1 00,020

12/02/00 User ID Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Date

Under the Paperwork Reduction And	 10	*	L STATE OF THE STA	T	J.S. DEPARTM displays a vali	

NEW	UTILIT	Y PAT	ENT
APPLICA	TION T	TRANS	MITTAL

(to be used for new applications only)

0 4-00 Patent and Toda d to respond to a collection of	mark Office: U.S. DEPARTMENT	T OF COMMERCE MB control number.
Attorney Docket Number	QSTR-01.0	PTO
First Named Inventor	Nomura	.s. 815.
Total Pages in this Submission	32_	46 U
	•	- eD =

APPLICATION ELEMENTS Notice: Checkist litems menifored under Application Elements section construct a new utility patent application. Please refer to MPEP Sections 506, 601, (37CFR 1.77, 1.53, 35 USC 111, 112, 113) for detailed explanation regarding completeness of an original patent application.			ACCOMPANYING APPLICATION PARTS					
			6. Assignment Papers 7. Certified Copy of Priority Document(s) (If foreign priority is claimed) 8. Computer Program in Microfiche 9. English Translation Document (If epplicable) 10. Information Disclosure Copies of IDS Statement/PTO-1449 Citations 11. Petition Checklist and Accompanying Petition 12. Preliminary Amendment 13. Proprietary Information 14. X Return Receipt Postcard 15. X Small Entity Statement 16. Additional Enclosures (please Identify below):					
4. X Executed Declaration				SIGNATURE OF APPLICANT ATTORNEY OR AGENT				
	quence Submissio e. <i>eli musi be indu</i>		-	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
(if applicable, all must be included) Paper Copy			Firm or Individual name	Robert J. Petersen				
Computer Readable Copy				Signature	Signature Volvert Letersu			
Statement Verifying Identical Paper and Computer Readable Copy			Date 02 Dec 2000					
		EOR OFFI	CIALL	ISE ON! Y			$\overline{}$	
FOR OFFICIAL U				SE UNL 1	1	Independent Claims		
Application Number Class				Independent Claims				
Date of Receipt Application Type GAU				Total Claims				
Filing Date Foreign			Filing License?		Drawing Sheets			
Small Entity Foreign			Address?		Special Handling?			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.